

Board Corner

By Jeanine Thomas, LPN



On a personal note, I want to congratulate St. Luke Community Healthcare Network in Ronan, on its 50th anniversary. In 1952, a community-wide effort was made to realize the birth of their hospital. In March of 1953, their dream was born. Since that time, St. Luke has grown by leaps and bounds, expanding to offer many diverse services to the valley. Many things have changed in all these years, but one thing remains the same. St. Luke stands for the community that built it and made it all possible. I am proud to be a member of the St. Luke team.

The LPN Role in IV Therapy



As many of you know, the Board revised the rules relating to the LPN's role with IVs and IV medications last October. These changes came because of requests from nurses and facilities in Montana.

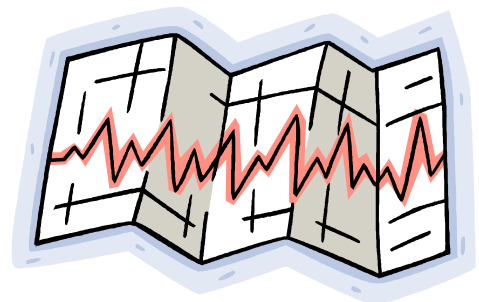
The major change in the LPN IV rules concerns the solution hung with the initial venipuncture. In the past, LPN's could start an IV and only hang a standard solution without additives. This presented a problem for many patients, as well as an added expense if the LPN started the IV and hung a 50cc bag of a standard solution only to follow with whatever solution the physician ordered. LPNs may now start an IV with a standard solution containing additives as long as they are not on the list of prohibited additives. A few examples of prohibited additives would be potassium, vasopressors, vasodilators, etc. For a complete list of prohibited additives, check the Board's web site,

www.discoveringmontana.com/dli/nur,
or call the Board office.

The LPN may also mix medication solution, except for potassium, from a unit dose vial and add it to the IV solution or volutrol device. For example, this will allow the LPN to reconstitute an antibiotic and start the infusion, after the initial dose, without the RN's intervention. Another change is that an LPN may administer a metered dose of a narcotic via a PCA pump. The LPN may hang a PCA medication cartridge subsequent to the first, after the RN has initiated and programmed the PCA unit.

The other changes were grammatical or ones of clarification. The proposed changes as well as the final language are available on the Board's web site. From the home page, choose Board Rules and Rule Notices on the right-side drop down menu. On that page, choose rule and rule notices. From that page, scroll to the MAR 8-32-57. One is the notice of proposed changes, and the other is the final change or amendment.

It is important to me that these changes are a result of Montana's nurses' and facilities' suggestions. The Board recognizes that as technology changes, roles and responsibilities may change, also. We, the Board of Nursing, welcome your suggestions, questions, and comments on all of our statutes, rules, and declaratory rulings. Your input is vital to a Nurse Practice Act that is current and useful for the nurses of Montana and safe for the public we serve.



Message from the National Council for State Boards of Nursing

(reprinted with permission)
Kathy Apple, Executive Director

Inevitable Change

Isaac Asimov, one of my favorite science fiction writers once said, "It is change, continuing change, inevitable change that is the dominant factor in society today. No sensible decision can be made any longer without taking into account not only the world as it is, but the world as it will be...." Although he said this more than 20 years ago, his insight and imagination make this remark just as relevant today. For me, this concept underscores two issues that on the surface seem unrelated but are clearly intertwined.

The nursing shortage is a driving force for change in health care today. We cannot ignore the statistics that show by 2010, our country will have the worst shortage of nurses in history. At the same time, we will also have the greatest demand for nursing care in history. This is the world that will be. Can we imagine how this future will really look? How will nursing practice be regulated? How will licensing boards protect the public? It is change, continuing change, inevitable change that will shape the world that will be.

Second is the new logo for NCSBN. This may seem unrelated to the nursing shortage, but the two are intertwined from my perspective. You may have read the front page article on the new logo and you may be aware that the symbolism of the "dancing squares" gives the feeling of movement. And should there not be movement at NCSBN?

Another approach to how we might think about change was articulated by a female race car driver, Denise McCluggage. She said, "Change is the only constant; hanging on is the only sin." How can we be ready for the future we see if we don't move with change and dance with the inevitable? So, at NCSBN, we want to be ready to assist Member Boards to stay on the cutting edge of nursing regulation by thought, word and deed.

Shall we dance?



Governor Martz Appoints Connie Schultz to the Board

On December 12, 2002, Governor Judy Martz appointed Connie Schultz, RN, to the Board of Nursing. Ms. Schultz will serve for the remainder of Jack Burke's term, ending July 1, 2003. Mr. Burke resigned last fall.

Ms. Schultz is the Chief Nursing Officer at Frances Mahon Deaconess Hospital in Glasgow. After completing high school, she entered the Army where she participated in the Walter Reed Army Institute of Nursing program. She graduated from the University of Maryland with her BSN, and then commissioned into the Army Nurse Corps (ANC) where she stayed for 23 years. Ms. Schultz has held a variety of positions within the ANC, including bedside and consultative nursing in critical care as well as a nurse educator. Since retiring from the military, she has been Director of Nursing at Frances Mahon Deaconess Hospital in Glasgow. Born and raised in Saco, Montana, Ms. Schultz is married to Jim Schultz who is a Hinsdale, MT native. They have two children, CJ and Jalynn.

BOARD MEMBERS

Kim Powell, APRN, President,
Sharon Dschaak, LPN, Secretary, Wolf Point
Vickie Badgely, LPN, Stevensville
Lorena Erickson, Public Member, Corvallis
Gretchen McNeely, RN DNSc, Bozeman
Karen Pollington, RN, MSN, Havre
Steven Rice, Public Member, Miles City
Connie Schultz, RN, MSN, Glasgow
Jeanine Thomas, LPN, Ronan

BOARD STAFF

Lori Ballinger, JD, Department Counsel
Joan Bowers, Compliance Specialist
Ron Burns, Investigator
Jill Caldwell, RN MSN, Office Manager
Elizabeth Carney, Licensing Technician
Cristina Medina, Licensing Technician
Darcee Moe, JD, Board Counsel
Barbara Swehla, RN MN, Executive Director

How an Idea Becomes an Administrative Rule

The Board proposes administrative rules on a regular basis. At times, the rule is the result of a concern or issue that has been brought to the attention of the Board of Nursing. At other times, the proposed change is identified during routine rule review or discovered during the legislative audit process. The Board tries to review all of its' rules on an annual basis.

The proposed adoption of a new rule or amendment or repeal of an existing rule often originates in a Committee of the Board. The Committee may report its' findings to the full Board, and may draft language to recommend to the Board. The full Board then comments on the draft, and changes may be made. The Board's Counsel is always present to hear these discussions and advise the Board. At this time, the Board decides if a hearing is necessary. The Board of Nursing has public hearings on almost all of its proposed rule amendments, adoptions, or repeals. Once the draft is acceptable to the Board, the proposed rule notice is filed with the Secretary of State's office and is published in the Montana Administrative Record. If you have asked to be on the Board's mailing list for administrative rule changes, you will receive the notice of proposed amendment when it is published. The rule notices are also available on the Board's web site.



If a hearing is necessary, the date and time of the hearing will be in the notice of proposed rule amendment, adoption or repeal. The deadline for public comment will also be in the notice. If you wish to submit a written or email comment to the Board, you must submit your comment before the deadline. Failure to do so will mean that the Board cannot consider your comment when they deliberate on the proposed change.






During the hearing, a court reporter is present to record everything that is said. The Board receives a transcript of this recording as well as a copy of all written testimony submitted before the deadline for comments.

The Board usually deliberates at a full Board meeting, and their intended date of deliberation will also be found in the notice of proposed rule amendment. ***When the Board deliberates, they may not take any additional comments.*** After deliberating, a Board member will offer a motion to adopt the rules as proposed or as amended.




The changes are then prepared as a final notice of adoption, amendment, or repeal, and again filed with the Secretary of State's office for publication in the Montana Administrative Register. The Administrative Rules of Montana is updated and reprinted on a quarterly basis. At that time, the amended or new rules are available free of charge on the Secretary of State's web site, as well as the Board's web site. The rules are also available in hard copy from the Board office. There is a \$20 fee for the entire set of laws, rules, declaratory rulings, and typical practice statements from the Board.

Recent Board Actions

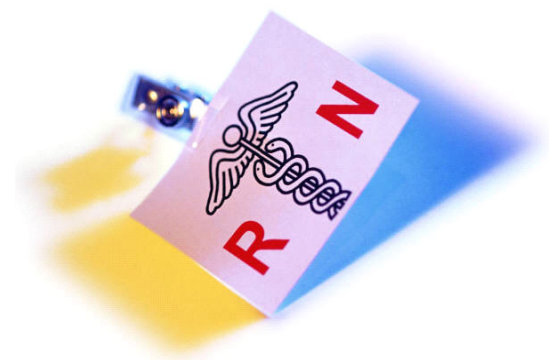
October 2002

-  Elected Kim Powell, APRN, to serve as Board President
-  Determined that "it is not within the scope of an RN to withdraw fluid, instill medication, or discontinue an intrathecal catheter."
-  Approved the collaborative pain statement from the Boards of Nursing, Pharmacy, and Medical Examiners.
-  Approved and requested implementation of temporary permit sworn statements for examination applicants and employers.
-  Adopted rules relating to APRN practice and LPN's role in IV therapy.

January 2003

-  Adopted rules relating to Nursing Program approval
-  Determined that it is within the scope of practice of a CRNA to perform a diagnostic lumbar puncture
-  Accepted a request from the Montana Board of Medical Examiners for declaratory ruling on a nurse's role in cosmetic procedures

For specific information about any of the Board actions or for a copy of the meeting minutes, please contact the Board office or refer to the Board web site.



Recent Rule Changes

At the October Board meeting, the Board considered comments from two previous rules change hearings and adopted the following changes.

- ✚ The LPN may start an initial IV using a standard solution containing additives not otherwise prohibited, so long as the IV is started in a peripheral vessel not using a PICC line.
- ✚ The LPN may mix medication solution from a unit dose vial and add it to the IV solution or volutrol, except for potassium. The LPN may not add potassium to an IV solution or volutrol.
- ✚ Once an RN has initialized and programmed a patient controlled analgesia device, the LPN may hang subsequent cartridges.
- ✚ The definitions of all APRN practice are standardized to include independent and collaborative practice. While this was always in their respective scopes, the practice definitions were not uniform.
- ✚ APRNs now have the option of inactive status.
- ✚ All licenses expire on December 31 of even numbered years.
- ✚ All APRNs will be required to show proof of continuing education upon licensure renewal and random quality assurance audits will be performed.

This is a summary of the changes. If you want to see the specific rule notices and specific language changes, consult the web site at www.discoveringmontana.com/dli/nur. Choose the menu on the right, and choose rules and rules notices.

Board Meeting Dates

April 22, 23, 24, 2003

July 22, 23, 24, 2003

Board of Nursing meetings are held in the fourth floor conference room of the South Park Building, 301 South Park Avenue in Helena. Most of the Board and Committee meetings are open to the public. Agendas are posted on the Board web site, <http://discoveringmontana.com/dli/nur>. If you need a hard copy agenda, please call the Board office.

Joint Board Statement Regarding Prescribing and Filling of Controlled Substances in the Treatment of Chronic Pain

The Montana Boards of Nursing, Medical Examiners, and Pharmacy recently adopted a joint position statement regarding pain control for individuals with chronic pain. The Boards recognize that chronic pain or inadequately treated pain, can lead to clinical exacerbations, increased suffering and eventual disability. Furthermore, requests for more pain medication are often interpreted as drug seeking behavior, when actually the patient may not be receiving adequate dosing or the appropriate type of pain remedies. With these factors in mind, the Joint Committee made several recommendations regarding the treatment of chronic pain.



These Provider recommendations include:

- ✎ obtaining a thorough history and physical exam,
- ✎ establishing a written treatment plan,
- ✎ obtaining informed consent of the patient,
- ✎ making appropriate referrals when necessary, and
- ✎ documenting all care and treatment thoroughly.

The Boards of Medical Examiners, Nursing and Pharmacy seek to ensure that no Montana resident will needlessly suffer due to undertreated pain, and encourage both prescribers and pharmacists to do their part by responsibly prescribing and dispensing opiates. The complete statement is available on the Board's web site, or by calling the Board office.

If you are reading someone else's newsletter, it may be because we do not have your correct address. If you move, please notify us within ten days. The same Post Office address change cards you use for your magazine subscriptions are acceptable to the Board office.

Message from the Executive Director

Renewals 2002



I was visiting with one of our seasoned board staff members, Joan Bowers, who told me that this past renewal season was one of the smoothest she can recall. Much of it has to do with the fact that about 30% of those of you who were eligible renewed online! Additionally, we were processing hard copy applications on the same day of receipt by the second week of the season. That represented a superior turnaround time for people to receive their licenses – our most important goal.

I wish to commend our staff, since we were down two full time licensing positions at the time. While we had the usual anxious callers the final days of December, overall, it was less problematic than in previous years. As always, we had hundreds of 'send-backs' for lack of signatures or incorrect fee amounts, etc., but we expect some of that to occur each season. That problem is not possible with online renewals, so as more and more people use that mechanism for renewal, we will see improvement.

Address Changes



Our mobile society is exemplified by the number of nurses relocating in Montana and out of state. Please realize that our rules require timely notification of address changes and newsletters and our web site include the appropriate form. We really appreciate it when licensees help us maintain current records!

Advanced Practice



One important individual was inadvertently omitted from my letter in the Fall BON Newsletter. I wish to thank Barb Prescott, our APRN Consultant, for her role in the APRN rule revision process. Her expertise and research activities were invaluable to the group as they developed the new rules governing APRN licensing and practice. Thanks, Dr. Prescott!

I truly believe that the new rules serve to further define scopes of practice and licensure requirements. They are also consistent with general requirements of APRN national certification for continuing education and quality assurance. Most importantly, the new rules are designed to be more understandable, logical, and congruent with the board's mission to protect the public, through responsive and responsible nursing regulation.

Upcoming Plans for Rule Revisions

During the coming year, we will be working on rule changes in the following areas:

- ⚙ curriculum requirements for RN and PN education programs ***(to be more consistent with national accreditation standards and current education principles)***
- ⚙ requirements of nurses in leadership positions, such as Directors of Nursing and Chief Nursing Officers ***(to provide guidelines for nurses who may not be actively involved in direct care, but are responsible for an organization's compliance with nursing regulations and oversight of licensed nurses and unlicensed assistive personnel)***



NCLEX Pass Rates

The website not only provides links to the Board-approved nursing programs in Montana, but also provides the NCLEX– PN and NCLEX– RN pass rates for each program. This is only one outcome indicator to which nursing education programs are held accountable, but it is an important, valid, and reliable means for evaluating program quality. The Board's objective is to ensure quality education and safe care by students and to prepare them for entry into nursing practice. One requirement for ensuring beginning competence is the student's ability to pass the licensing examination.

The pass rates are calculated on an annual basis, using data from first time candidates (since that is typically the best rate), and takes into account those programs with small graduating classes.

Temporary Permits for New Graduates

Montana nursing license applicants may be issued temporary permits upon receipt of a completed application, signed statements from the applicant and perspective employer, approval by Board staff, and authorization to sit for the licensing examination. This permit historically was automatic, but is now based on an agreement for supervision by a registered nurse with a clear license until the permittee has passed the licensing examination and holds a license to practice professional or practical nursing.



Stipulations and Final Orders

Name	License #	City	Action
Sally Wedlake	LPN 6576	Lake Havasu City, AZ	Probation 3 yrs with CE
Pamela Garza	RN 26845	Crow Agency, MT	Probation 2 yrs with CE
LaRay Collins	LPN 1891	Billings, MT	Probation 4 yrs with CE
Bonita Stephens	LPN 8851	Helena, MT	Voluntary Surrendered
Kraig Brandt	Applicant	Minot, ND	Deny Licensure
Michael Parchen	LPN 7289	Great Falls, MT	Public Letter of Reprimand.
Caroline Myhre	RN 5354	Charlo, MT	Probation 1 yr with CE
Dennie Payne	LPN 25490	Missoula, MT	Probation 10 yrs with CE & restricted practice
Linda Dunlap	LPN 27215	Missoula, MT	Probation 3 yrs with CE
Mark Ames	RN 24280 & NP	Kalispell, MT	Suspended (30) days, CE Required prior to reinstatement then probation for 3 yrs with CE

****Names and license numbers are published as a means of protecting the public safety, health, and welfare. Only Final Orders, which are public information, are published in this newsletter. Pending action against any licensee is not published. Please advise the Board office if any of the above nurses is working outside his/her licensure capacity.***

*****Those licensees with Nurses Assistance Program (NAP) listed have been placed on NAP through the formal Board process. Licensee names and information on the Voluntary Track of NAP are confidential, and this information is not available to the public.***

Department of Labor & Industry – Business Standards Division & the Board of Nursing Offer On-line Query Capability for Business and Occupational & Health Care Licensing

Verifying a licensee's status and credentials is available on-line. While you may still obtain this information by calling the Board office, the on-line function may be quicker, and it is accessible 24 hours a day, 7 days a week. The site is

<http://app.discoveringmontana.com/bsding/index.html>.

Staff Corner

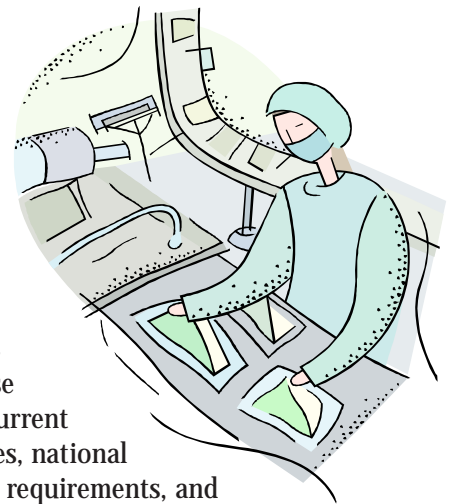


The Board office started the new year with two new faces. Liz Carney and Cristina Medina have joined the Board staff as licensing technicians. Both Liz and Cristina are well qualified and bring valuable office experience with them. The staff plans to work on simplifying office processes in the coming year.

Nursing Education

Rules Adopted

During the past three years, the Board's Education Committee has met with educators from all of the nursing programs in Montana to revise the education rules. The group's goal was to increase consistency with current education principles, national accrediting agency requirements, and to offer a more flexible, reasonable and consistent approach to program implementation and reports to the Board.



The Board adopted the rule changes at its January 2003 meeting. Please check the website:

www.discoveringmontana.com/dli/nur for updated information on the rule changes.

Has Your Address Changed? Have You Changed Jobs?

Please be sure your address and employer(s) are current with the Montana Board of Nursing. The Board depends on accurate and timely information from licensees to ensure that important communications, including your license renewal forms, reach you!

Address Change

Full Legal Name: _____

License Number: _____ RN or LPN

Social Security Number: _____

Address: _____
Street City State Zip

Phone: _____
Home Work

Employer Change

Employer Name: _____

Address: _____

Phone: _____

Methods you may use to provide the above information:

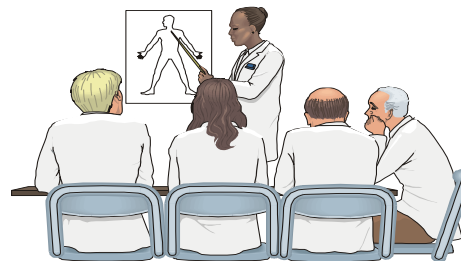
FAX: 406-841-2343
E-Mail: dlibsdnur@state.mt.us
U.S. Mail: PO BOX 200513
Helena MT 59620-0513
Telephone: 406-841-2340



National Council of State Boards of Nursing Chooses Two Montanans to Serve on NCLEX Review Committee

The Montana Board of Nursing and the National Council thank the following volunteers for their time and commitment to the NCLEX development process. The volunteers' time and energy are valuable contributions to the future of nursing across the United States. Both have served in the past.

- ✱ **Martha Jones, LPN, served as a panel member on the September PN Examination Item Review session. Ms. Jones is from Great Falls.**
- ✱ **Charlotte Brurud LPN, served as a panel member on the March PN Examination Item Review session. Ms Brurud is from Belt.**



The NCLEX® examinations (NCLEX-RN® examination and NCLEX-PN® examination) are developed by hundreds of nursing professionals and testing specialists. There are three different panels: Item Writers, Item Reviewers, and Panel of Judges. The sessions are ongoing year round and last an average of three to five days. The item development panels are assembled one to two months before the session is to take place.

The qualifications for each panel are listed at the end of the application on the National Council web site. Basically, in order to qualify, you must either work in a clinical setting with newly licensed nurses or you must be a faculty member. National Council will keep your application active for two years from the date of approval. For more information, log on to www.ncsbn.org.

15,000 copies of this public document were published at an estimated cost of .528¢ per copy, for a total cost of \$7,920.00, which includes \$3,750.00 for printing and \$4,170.00 for distribution.

PERMIT NO. 89
HELENA, MT
PAID
U.S. POSTAGE
FIRST CLASS
PRESORT

MONTANA STATE BOARD OF NURSING
FEDERAL BUILDING, 301 SOUTH PARK AVENUE
PO BOX 200513
HELENA, MT 59620-0513